

**GRAPEVINE TOWNSHIP REVITALIZATION PROJECT
REQUEST FOR WAIVER FROM MATCHING FUNDS
2008-2009 GRANT PROGRAM**

General Criteria

Grant Applicants may request a waiver from the matching funds requirement for Owner-occupied residences. The Township Board of Directors will review this application and required attachments and determine if the applicant is eligible to receive a waiver. Only the Township Board of Directors will award a Waiver to the matching funds requirement.

Families and individuals with gross annual incomes not exceeding those indicated in the Housing and Urban Development (HUD) Income Limits Table may fill out this application for the waiver request. This waiver request is for Owner-occupied homes only. The grant awarded does not have to be repaid if certain conditions are met. See Repayment conditions in the Grant Guidelines.

Applicants requesting this waiver must fulfill the following requirements:

1. Gross annual income may not exceed the 80% Low Income limitation, and
2. Owner occupied residence only, and
3. Repairs are for exterior rehabilitation only, and

Note: Approval of a request for a waiver from the matching funds requirement will be based on an applicant's ability to match revitalization improvements with monthly income and available assets. The Township will only pay a maximum of \$10,000 in revitalization work.

The Director of Development Services may increase the above stated amount in cases where existing conditions of the residence require additional assistance or where the proposed work exceeds the goals and objectives of this grant program. The increase must receive final approval from the Board of Directors prior to becoming effective.

After a Waiver and Grant is awarded, any increase or decrease in construction expenses, including cost increases, change orders and overruns shall be determined and assumed by the Owner.

Funds

Any Grant funds awarded with an approved waiver request will be disbursed to the Owner, when:

- there is evidence that the project is completed; and
- the work passes inspection by the City of Grapevine Building Inspections Department (where required); and
- after the property owner has submitted the Historic Landmark Subdistrict application form; and
- after non-conforming work is modified where required by the Grapevine Historic Preservation Commission and/or the City of Grapevine Buildings Inspections Department (for achieving final inspection).

Date: _____

Applicant: _____

Owner Address: _____ Zip: _____

Owner Telephone(s): _____

My home is in my/our name: Yes _____ No _____

I have read and understood the instructions. Yes _____ No _____

HEAD OF HOUSEHOLD:

Married Yes: _____ No: _____ Year House was purchased : _____

Name	Relation to Head	Sex	Age	Monthly Income*		Income last year**
				Amount	Source	

* Child Support, Social Security, AFDC, Retirement, Rental Income, Wages, etc.

** Furnish a copy of last year's income tax return.

SOCIAL SECURITY NUMBER:

Head of Household: _____

Spouse: _____

First Child: _____

Second Child: _____

Third Child: _____

Others living in household: _____

2004 HUD Income Limits for HOME funds in Tarrant County:

	1 person	2 persons	3 persons	4 persons	5 persons	6 persons	7 persons	8 persons
80% Low Income	30,952	35,400	39,800	44,250	47,800	51,300	54,850	58,400
100%	38,700	44,200	49,800	55,300	59,700	64,100	68,600	73,000

Employment Information

Employer Name	Street Address	City/Zip	Telephone No.	Dates of Employment
Previous Employer	Street Address	City/Zip	Telephone No.	Dates of Employment
Spouse's Employer	Street Address	City/Zip	Telephone No.	Dates of Employment
Spouse's Previous Employer	Street Address	City/Zip	Telephone No.	Dates of Employment

Bank Verifications

Name of Bank	Street Address	City/Zip	Checking Account No.	Savings Account No.
Name of Bank	Street Address	City/Zip	Checking Account No.	Savings Account No.

Individual Retirement Accounts (IRA's), Certificates of Deposit (CD's), and/or other Securities

Name of Bank/Firm	Street Address	City/Zip	Type of Account	Account No.

Other Real Estate Owned

Name Lender	Street Address	City/Zip	Previous Foreclosures
			Yes () No ()
Property Street Address		City/State/Zip	

Return this application to: Grapevine Township Revitalization Project, Inc.
1 Liberty Park Plaza
Grapevine, Texas 76051

I certify that all information contained in this waiver request and all information furnished in support of this waiver request is given for the purpose of obtaining financial assistance in the form of a grant and is true and complete to the best of my knowledge and belief.

Owner Signature

Date

AUTHORIZATION FOR VERIFYING INCOME AND BENEFITS

TO THE GRAPEVINE TOWNSHIP REVITALIZATION PROJECT, INC. GRANT PROGRAM:

I hereby authorize you to verify Income and benefits and to secure any information that may be necessary for establishing my eligibility for this waiver from the matching fund requirement in the Grant Township Revitalization Grant Program. It is understood that this information is for the confidential use of the Township Revitalization Grant Program of the City of Grapevine.

Owner Signature

Date

The State of _____

County of _____

Before me _____ on this day personally appeared
_____ known to me (or proved to me on the oath of

_____ or through _____
(description of identity card or other document) to be the person whose name is
subscribed to the foregoing instrument and acknowledged to me that he executed the
same for the purposes and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____,
A.D. _____.

SEAL

Notary Signature